1995-96 SESSION COMMITTEE HEARING RECORDS

<u>Commíttee Name:</u>
Joint Committee on
Finance (JC-Fi)

Sample:

Record of Comm. Proceedings ... RCP

- 05hrAC-EdR_RCP_pt01a
- > 05hrAC-EdR_RCP_pt01b
- 05hrAC-EdR_RCP_pt02

- > Appointments ... Appt
- > **
- > Clearinghouse Rules ... CRule
- > **
- > Committee Hearings ... CH
- > **
- > Committee Reports ... CR
- > **
- > Executive Sessions ... ES
- > **
- > <u>Hearing Records</u> ... HR
- **
- ➤ <u>Miscellaneous</u> ... Misc
- > 95hrJC-Fi_Misc_pt84
- Record of Comm. Proceedings ... RCP
- > **

STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON

JAMES R. KLAUSER SECRETARY

GOVERNOR

Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

December 1, 1995

Joe Leean, Secretary Department of Health and Social Services PO Box 7850 Madison, WI 53707-7850

Adoption Opportunities (Preparing Prospective Adoptive Parents to Adopt Children in Foster Care), State Application Identifier Number WI950717-207-N93652XX

Dear Secretary Leean:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

Sincerely,

James R. Klauser

Secretary

Department of Administration DOA-7020(R12/92) Federal-State Relations Office 104 E, Wilson Street, 6th Floor P.O. Box 7968 Medicon, WI 53707-7868

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	of Health &	7 7		2	<u> 93.</u>			
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	WI 53707-785		P**	6 Period	of Funding M		Application Due	Date
Contact Person				·········	107.1		Mo/Day/Yes	u l
Karen Og		Phone 266-06	90		9/30		/9/95	
8 Agency Project T	itle			9 Execut	ive Order 1237	72 Review Require	ed 10 Area of Im	/States
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\	t Children in		_:/		aan Matilla		Statewid	e
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		Signature).	105		. ^	Date		
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Reviewing Anal	n +1	in Fossu	/	<u>ر ک</u>	<u>83</u>	SAI Number 4	JI9501	19-20
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recommendation	7-1-3		1	1/201-	•	Date Due	クーダノー	95
Signature 2	MWW H-T	www_	Date	124 75		04/6 DNG		
COMMENTS								
 								

101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

December 1, 1995

Joe Leean, Secretary Department of Health and Social Services PO Box 7850 Madison, WI 53707-7850

> Tuberculosis Disease Control, State Application Identifier Number WI951108-309-N93116XX

Dear Secretary Leean:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

Sincerely,

James R. Klauser

Secretary

Department of Administration DOA-7020(R12/92)

Federal-State Relations Office 101 E. Wilson Street, 6th Floor P.O. Box 7868 Madison, WI 53707-7868

Telephone 608/267-2125 Applicant Agency
, DHSS Division of Healt 3 Agency I.D. (Optional) Thereis Agency to Receive Request Address (Street/City/State/Zip) 1414 E Washington Ave Madison WI 53703 Period of Funding Mo/Day/Year 1/1/96 Application Due Date Contact Person Mo/Day/Year Kenneth Baldwin 12/31/96 10/6/95 9 Executive Order 12372 Review Required 10 Area of Impact Counties/States Tuberculosis Disease Control ☐ Yes Statewide 11 Type of Application 12 Type of Assistance Clearinghouses: Notified **New Grant** Grant Amendment to Current Grant Formula Discretionary —
Other Co-Op Agreement Continuation-Unchanged LX Continuation-Modified More than 5 All 13 Number of Years Previously Funded_ 14 Funding, Allotment and Position Data (including Federal indirect costs) 264,590 Total Federal Funds Applied For New Positions (FTE) Type Numeric **Existing Positions** Appropriation Source Revenue Type Amount No. (FTE) No. (FTE) Type 149 Federal PRF 264,590 1.0 1.5perm. Perm. 15 Indirect Cost Reimbursement X Yes Rate 13.2 Amount <u>12,426</u> 16 Authorizations Authorized Agency Representative (Type or Print) Title if other than Agency Secretary Richard W. Lorang Deputy Secretary Delegated Review Date 10-4-2 FOR DEPARTMENT OF ADMINISTRATION USE ONLY Recommendation: **Approve With Conditions**

Date 11/30/95

H-782-1

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration Form DOA-7020 (R 5-88) (Formerly FDA 50)

Federai-State Relations Office 101 S. Webster St., 6th Floor P.O. Box 7368 Madison, Wi 53707-7868

	Felephone 608/267-2125
1 Applicant Agency Department of Health & Social Services	2 Agency I.D. (Optional)
4 Address (Street/City/State/Zip)	CFDA # 11.505
Section of Occupational Health 1414 E. Washington Ave., Rm. 112	5 Federal Agency to Receive Request
1414 E. Washington Ave., Rm. 112	
Madison, WI 53703	6 Period of Funding Mo/Day/Year 7 Application Due Date 10-01-95 Mo/Day/Year
Terry E. Moen, Chief Phone 608-266-8579	
8 Agency Project Title	9 Executive Order 12372 Review Required 10 Area of Impact
Mosh Konsultation Agreements	Counties/States
	☐ Yes ☐ No
11 Type of Application 12 Type of Assistance	Clearinghouses: Notified Dates All Counties
New Grant Grant	Statewide
Amendment to Current Grant Formula	- 14 State -
Continuation-Unchanged Discretionary	
Continuation-Modified Other Contract	
13 Number of Years Previously Funded 20 years	AII
14 Funding, Allotment and Position Data (including Federal indirect costs)	
Total Federal Funds Applied For \$753,000 Numeric	Warran and the state of the sta
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15 Indirect Cost Reimpursement	
Yes Rate Base	Amount No
16 Authorizations Authorized Agency Represent	ative (Type or Print) Title if other than Agency Secretary
Richard W. Lorang	
Delegated Review Signatore	Date
	nong 9-21-75
FOR DEPARTMENT OF ADM	
Reviewing Analyst Luc Yald on SK Phone 7-	-9596 SAI Number WI95 0929-281-V
Recommendation: Approve Approve With Conditions	$\overline{}$
Signature Date	Date Due 1504
COMMENTS:	$\bigcirc n(V \times)$
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Comments Continued on Reverse or on a Separate Sheet	

4-786-1

Department of Administration

Comments Continued on Reverse or on a Separate Sheet

DOA-7020(R12/92)

Federal-State Relations Office 101 E. Wilson Street, 6th Floor P.O. Box 7868 Madison, WI 53707-7868

Preventive Health	Service	6	_	Madison, WI 5370 Telephone 608/26	
1 Applicant Agency	2		3	Agency I.D. (Optio	onei)
Health and Social Services		CFDA# 93	. 9 7 7		
4 Address (Street/City/State/Zip)	5	Federal Agency	to Receive Request	O.F.C	•
1414 E. Washington Ave.		Centers f	or Disease (Control and	Prevention
Madison, WI 53703-3044	6		g Mo/Day/Year 7	Application Due	
Contact Person		1/1/96 <u>- 1</u>	<u>2/31/96</u>	Mo/Day/Yea	ır
Jerald L. Young Phone 266-58	319		***************************************	10/6/9	5
8 Agency Project Title	9	Executive Order	12372 Review Requir	ed 10 Area of Im	pact
Sexually Transmitted Disease Progra		Yes	(No	Counties. State	
11 Type of Assistance	Cle	aringhouses: No	tified Dates		
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16 Authorizations Authorized Agency Richard W.	Torang	(Type or Print)		Agency Secretary	′
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X Delegated Review Signature	Zan	***			
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Reviewing Analyst Lul 9 ablon Ske	Phone	- 12016	SAI Number_ <u></u>	I-95/10	8-38 N93
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Department of Administration

DOA-7020(R12/92)

Federal-State Relations Office 101 E. Wilson Street, 6th Floor P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/267-2125

1 Applicant Agency	/		2	000 05 0005	3 A	pericy I.D. (Optional)	
Dept of H	ealth & Socia	al Services	CFI	0A283-95-0005			
4 Address (Street/0	City/State/Zip)		5 Fed	eral Agency to Receive	Request		
1 W Wilso	n P.O. Box 7	7851	Sub	ostance Abuse	& Menta	l Hlth Serv Ad	mih
Madison	WI 53707		6 Peri	iod of Funding Mo/Day/	Year 7 A	pplication Due Date	_
Contact Person			9/3	30/95 <u>-9/29/96</u>	[Mo/Day/Year	
Mike Quirk		Phone 266-7584				7/3/95	
8 Agency Project T		_	9 Exe	cutive Order 12372 Revie	w Required		
Drug Abus	e Services Ir	formation System		☐ Yes ▼ ☑ N		Counties/States	
		WW.		☐ Yes ♥ ☑ N	10	Statewide	
11 Type of Application	on <u> 1</u>	2 Type of Assistance	Clearin	ghouses: Notified	Dates		-
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COMMENTS:				•		レスセレン	177
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101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

December 8, 1995

Michael J. Sullivan Secretary Department of Corrections PO Box 7925 Madison, WI 53707

Special Education-Personnel Development and Parent Training (Systematic Professional Interactions for Correctional Educators), State Application Identifier Number WI951208-324-N84029XX

Dear Secretary Sullivan:

The Department of Administration has reviewed the above noted grant application. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

pepartment of Admi	nistration						Federal-State Relations Office
DOA-7020(R12/92)					Ta	ihing	101 E. Wilson Street, 6th Floor
Special	Educat	ion-Pers	minel	NPO	1. + F		P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/267-2125
1 Applicant Agenc	У		4 14 (2)	2	<u> </u>		Agency LD. (Optional)
Wisconsin	Department of	Corrections	3	CFD/	# 8 4	· 029K	A COPOUND
4 Address (Street	(City/State/Zip) ilson Street,	······································	***	5 Feder	al Agency to	Receive Request	Office of Special
	I 53707-7925			U	ent or	_tducation/	Education
Contact Person		(608)-	•	6 Period		Mo/Day/Year 7	Application Due Date Mo/Day/Year
Elaine Gra	nke	Phone 266-7		**	10/0	01/95- /30/98	12/08/95
8 Agency Project	fitle		\leftarrow	9 Execu		****	nd 10 Area of Impact
Systematic	Professional	. Interaction	s for	ام محد	uve Order 12	212 HEVIEW REQUIR	Counties/States
	al Educators) [] Yes	X No	State of
11 Type of Applicat		2 Type of Assistanc		Clearing	ouses: Notif		Wisconsin
New Grant	L	Grant		Oldaring.	ouses. Notin	eu Dates	(With dissemination
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	on-Modified	Other					agencies and
	Previously Funded			***************************************	AH		states)
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16 Authorizations	·	Authorized Agency	Representa		or Print)	Title if other than A	
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		Merke	LU	V. Il		December 4,	1995
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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

December 19, 1995

The Honorable James Doyle Attorney General Wisconsin Department of Justice 123 West Washington Avenue Madison, WI 53703

> DNA Improvement Project, State Application Identifier Number WI951207-322-N00000XX

Dear Attorney General Doyle:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

Department of Administration DOA-7020(R12/92) Federal-State Relations Office 101 E. Wilson Street, 6th Floor P.O. Box 7868 Medison, WI 53707-7868 Telephone 608/267-2125

1 Applicant Agency		2 CFDA # •		pency LD. (Optional)	
Wisconsin Department of	Justice	5 Federal Agency to F			
4 Address (Street/City/State/Zip)		National Inst		tice	
P.O. Box 7857, Madison,	WI 53707-7857	6 Period of Funding	vio/Day/Year 7 A	pplication Due Date	
Contact Person	(608)	1/1/96 th		Mo/Day/Year	
Michael A. Roberts	Phone 266-7052	12/31/97		ember 30, 1995	
8 Agency Project Title		9 Executive Order 123	172 Review Required	10 Area of Impact Counties/States	
DNA Improvement Project		Yes	X No		
140	Type of Assistance	Clearinghouses: Notifi		Statewide	
	Grant		= PATH		
Amendment to Current Grant	Formula	10001	<u> </u>		
	Discretionary			***************************************	
Continuation-Modified	Other				
13 Number of Years Previously Funded	<u> </u>	1All			
14 Funding, Allotment and Position Data (inc					
Total Federal Funds Applied For \$73	7,950				
Numeric Appropriation Source	Revenue Type Arr	New income New income (FTE)	Positions Type	Existing Positions No. (FTE) Type	
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15 Indirect Cost Reimbursement	* *	A marint		⊠ No	
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16 Authorizations	Authorized Agency Represe	menag (taba ot Little)	Attorney G	-	
 	James E. Doyle	1/1	Date	711/VE G.L.	
Delegated Review	James 2	. Wal	November	28, 1995	
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10. 6	ank-Reece Phone -	6-82-70	SAI Number WI	505 57 80	2-N 000

STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

December 20, 1995

Dr. H. Nicholas Muller, III Director State Historical Society of Wisconsin 816 State Street Madison, WI 53706

> Promotion of the Humanities-(Program for Secondary Level Teachers on the US Constitution), State Application Identifier Number WI951218-331-N45127XX

Dear Dr. Muller:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

Department of Administration

Federal-State Relations Office

101 S. Webster St., 6th Floor Form DOA-7020 (R 5-88) P.O. Box 7868 (Formerly FDA 50) Madison, WI 53707-7868 Telephone 608/257-2125 tamaueti 3 Agency I.D. (Optional) 1 Applicant Agency CFDA # 4 5 .127 State Historical Society of Wisconsin Address (Street/City/State/Zip) 816 State Street Madison, WI 53706 5 Federal Agency to Receive Request National Endowment for the Humanities Period of Funding Mo/Day/Year 7 **Application Due Date** Mo/Day/Year 608/26 Contact Person 3/1/1998 Matthew T. Blessing /15/96 9 Executive Order 12372 Review Required 10 Area of Impact 8 Agency Project Title Counties/States Program for Secondary-Level Teachers on the U.S. Constitution Yes X No Statewide 12 Type of Assistance type of Application Clearinghouses: Notified Dates Grant New Grant Formula Amendment to Current Grant M Discretionary Continuation-Unchanged Continuation-Modified Other. All 13 Number of Years Previously Funded__Q 14 Funding, Allotment and Position Data (Including Federal Indirect costs) 24,931 Total Federal Funds Applied For .. **Existing Positions New Positions** Numeric No. (FTE) Type Appropriation No. (FTE) Type Revenue Type Amount Source GPR 8.203 Perm 101 State Federal PR-F \$ 24,931 141 \$ 15 Indirect Cost Reimbursement _ Amount \$2.436 10.83% Base \$22,495 X Yes Rate. Authorized Agency Representative (Type or Print) Title if other than Agency Secretary 16 Authorizations Associate Director Robert B. Thomasgard Delegated Review FOR DEPARTMENT OF ADMINISTRATION USE ONLY SAI Number Reviewing Analyse Denv Date Received . Approve With Conditions Recommendation Signature

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM
Federal-State Relations Office

Form DOA-7020 (R 5-88 (Formerly FDA 50)		in out	+	6 Sa O	a un o i		101 S. Webs P.O. Box 780 Madison, Wi Telephone 6	53707-7868
1 Appliicant Agency	emp 100	men				, S		D. (Optional)
1 Applicant Agency				CFDA#	17.	5092	SBR 1-9	AND THE RESERVE OF THE PARTY OF
Address (Classet/C)	, Labor & Human F	\cialions		1	Agency to Rec	SWAR	And the second s	
		7046			ept. of Labor			
	ton Ave., P. O. Box	(/ 54 0			of Funding Mo/		7 Applicat	ion Due Date
Madison, WI 53	707-7946			<u> </u>	12\1\95	-	<u></u>	ay/Year
Contact Person		Phone 266-4	อววก		12\31\96			20\95
Bill Weber	1.	7 110316 200-1	UZZU	_e Executi	ve Order 1237	2 Review Rec		Area of Impact
8 Agency Project Tit		tion Start Lin					·	Counties/States
1 1	ary Withholding Op	dion Start-Op		│ ┌┐ Yes	(rs	g No		
\ Funding	_	1 ₁₂ Type of Ass	istance	Clearinghous	\ ¥	Dates	Sta	tewide
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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

December 19, 1995

Darrell Bazzell, Administrator Office of Planning and Analysis Department of Natural Resources 101 S. Webster Street, 5th Floor Madison, WI 53702

Outdoor Recreation-Acquisition, Development and Planning (1996-2001 SCORP), State Application Identifier Number WI951012-290-N15916XX

Dear Mr. Bazzell:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

This letter constitutes compliance with the requirements for State Clearinghouse review under Presidential Executive Order 12372. Regional clearinghouses which have comments will send review letters directly to you.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

america

Secretary

A copy of this letter must be transmitted to the federal granting agency with your application.

(Formerly FD)	of Administration 020 (R 5-88) A 50)	Recrea	dion -	Phina Aguis	tran	101 S. W P.O. Box Medison,	tate Relations Office lebster St., 6th Floor 7868 WI 53707-7868 e (608) 267-2125
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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON

GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

January 2, 1996

Mr. Nathaniel E. Robinson, Administrator Division of Energy and Intergovernmental Relations Department of Administration PO Box 7868 Madison, WI 53707-7868

Environmental Education Grant (Adopt A Wetland--Wetland Field Training Component), State Application Identifier Number WI951218-327-N66951XX

Dear Mr. Robinson:

The Department of Administration has reviewed the above noted grant application. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

Department of Administration DOA-7020(R12/92)

Federal-State Relations Office 101 E. Wilson Street, 6th Floor P.O. Box 7868 Madison, WI 53707-7868 Telephone 508/267-2125

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1 Applicant Agency		2	Surrent 1992	pency I.D. (Optional)
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4 Address (Street/City/State/Zip)	_	5 Federal Agency to	tal Protectio	n Agency
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101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

December 28, 1995

Darrell Bazzell, Administrator Office of Planning and Analysis Department of Natural Resources 101 South Webster Street, 5th Floor Madison, WI 53702

> Wisconsin Clean Vessel Act Implementation, State Application Identifier Number WI951227-338-N15616XX

Dear Mr. Bazzell:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Sedretary

A copy of this letter must be transmitted to the federal granting agency with your application.

WISCONSIN FEDERAL GRANT AFFEIGATION

Department of Administration Form DOA-7020 (R 5-88) (Formerly FDA 50) Federal-State Relations Office 101 S. Webster St., 6th Floor P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/267-2125

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101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

December 28, 1995

Charles H. Thompson Secretary Department of Transportation PO Box 7910 Madison, WI 53707-7910

Public Transportation for Nonurbanized Areas, State Application Identifier Number WI951222-337-N20509XX

Dear Secretary Thompson:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

This letter constitutes compliance with the requirements for State Clearinghouse review under Presidential Executive Order 12372. Regional clearinghouses which have comments will send review letters directly to you.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Sedretary

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

Department of Administration Form OOA-7020 (R 5-88) (Pormerly FDA 50)

Comments Continued on Reverse or on a Separate Sheet

Federai-State Relations Office 101 S. Webster St., 6th Floor P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/957-2128

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101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

January 3, 1996

The Honorable James Doyle Attorney General Wisconsin Department of Justice 123 West Washington Avenue Madison, WI 53703

> Crime Victim Assistance, State Application Identifier Number WI951218-332-N16575XX

Dear Attorney General Doyle:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

Department of Administration

DOA-7020(R12/92)

Federal-State Relations Office 101 E. Wilson Street, 6th Floor P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/267-2125

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1 Applicant Agency			CFDA# 16 •	5.7.5		
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Stave Derene	Phone (608)26	<u> 57-22\$1</u>				\dashv
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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

January 5, 1996

Joe Leean, Secretary Department of Health and Social Services PO Box 7850 Madison, WI 53707-7850

> Comprehensive Community Mental Health Services (Child Mental Health Services Initiative), State Application Identifier Number WI951220-334-N93104YY

Dear Secretary Leean:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

Sincerely,

James R. Klauser

multerin

Secretary

WISCONSIN FEDERAL GRANT APPLICATION NOTICE Federal-State Relations Office Department of Administration 101 E. Wilson Street, 6th Floor DOA-7020(R12/92) P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/267-2125 2 **Applicant Agency** 3 Agency I.D. (Optional) Dept of Health & Social Svcs. CFDA # 93 .104 4 Address (Street/City/State/Zip) Federal Agency to Receive Request 1 West Wilson Street SAMHSA: Ctr for Mental Health Svo Madison WI 53703 Period of Funding Mo/Day/Year 7 **Application Due Date** Contact Person Mo/Day/Year 2/1/96 12/15/95 L/31/97 Phone 266 - 6838 Eleanor McLean Agency Project Title Executive Order 12372 Review Required 10 Area of Impact child Mental Health Sycs Initiative Counties/States EX XIO L Yes Milwaukee 11 Type of Application 12 Type of Assistance Clearinghouses: Notified **New Grant** Grant **Amendment to Current Grant** Formula Continuation-Unchanged Discretionary ✓ Continuation-Modified Other All 13 Number of Years Previously Funded TWO14 Funding, Allotment and Position Data (including Federal indirect costs) Total Federal Funds Applied For <u>\$3,000,000</u> Numeric **New Positions Existing Positions** Appropriation Source Revenue Type **Amount** No. (FTE) No. (FTE) Type **\$**3,000,000 PR-F Federal 3.5 Proj 641/741 730 \$ 631,600 State CPR. Match In-Kind 393.09l9 Local In-Kind Other 550,000 Local 38,040 In-Kind State 15 Indirect Cost Reimbursement Amount 5,468.00 XX Yes Base 109 369 Rate 52 16 Authorizations Authorized Agency Representative (Type or Print) Title if other than Agency Secretary Richard Lorang Denuty Secretary Date Signatun Delegated Review

FOR DEPARTMENT OF ADMINISTRATION USE ONLY

Reviewing Analyst Oretcher 13 Supriore 6 233 SAI Number 15/3/3/2 Date Received 12-20-75

Signature with 4 famour Date 13/94 Date Due 1-3-76

COMMENTS:

101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

January 3, 1996

Joe Leean, Secretary Department of Health and Social Services PO Box 7850 Madison, WI 53707-7850

> Head Start (Collaboration Project), State Application Identifier Number WI951113-313-N93600XX

Dear Secretary Leean:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

This letter constitutes compliance with the requirements for State Clearinghouse review under Presidential Executive Order 12372. Regional clearinghouses which have comments will send review letters directly to you.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

A copy of this letter must be transmitted to the federal granting agency with your application.

Federal-State Keletions Umce 101 E. Wilson Street, 5th Floor

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	P.O. Box 7965
7	Madison, Wi \$3707-7968
!	Telephone #08/267-2125
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101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7868 Madison, WI 53707-7868

CORRESPONDENCE MEMORANDUM

September 14, 1995 DATE:

Senator Timothy Weeden, Co-Chair Joint Committee on Finance TO:

Representative Ben Brancel, Co-Chair Joint Committee

on Finance

Robert Lang, Director Legislative Fiscal Bureau

FROM: Jeff Smith, Section Chief

> Federal-State Relations Office Department of Administration

RE: APPLICATIONS FOR FEDERAL ASSISTANCE

In fulfillment of s.16.54, please find enclosed reports of recent state agency applications for federal aid.

If you have any questions, please call me at 266-0267 or the State Agency contact indicated on the application.

Attachments

STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7868 Madison, WI 53707-7868

August 30, 1995

Ms. Cheryl Gest Administrative Officer Research Administation-Financial University of Wisconsin 750 University Avenue 440 AW Peterson Building Madison, WI 53706-1490

> Small Business Development Center, State Application Identifier Number WI950801-226-N59037XX

Dear Ms. Gest:

The Wisconsin Department of Administration, the State Grant Review Clearinghouse, has reviewed the application for federal funding assistance. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

This letter constitutes compliance with the requirements for State Clearinghouse review under Presidential Executive Order 12372. Regional clearinghouses which have comments will send review letters directly to you.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Simperely

Jenf Smfth Section Chief Federal State Relations

Division of Energy and Intergovernmental Relations

A copy of this letter must be transmitted to the federal granting agency with your application.

Separtment of Administration Form DOA-7029 (R 5-88) (Formerty FDA 50)

og Skalik og som Sekker og Federal-State Relations Office 101 S. Webster St., 6th Floor P.O. Box 7868 Medison, WI 53707-7868 Telephone 608/257-2125

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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7868 Madison, WI 53707-7868

<u> (د بر </u>

August 30, 1995

Mr. Robert W. Erickson, Director Research Administration-Financial UW-Madison 750 University Avenue Madison, WI 53706-1490

Cooperative Forestry Assistance (InfoSource Public Information Transfer System), State Application Identifier Number WI950809-231-N10664XX

Dear Mr. Erickson:

The Wisconsin Department of Administration, the State Grant Review Clearinghouse, has reviewed the application for federal funding assistance. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

This letter constitutes compliance with the requirements for State Clearinghouse review under Presidential Executive Order 12372. Regional clearinghouses which have comments will send review letters directly to you.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens Λ

Sincerely

Jeff/Smith Section Chief Federal-State Relations

Division of Energy and Intergovernmental Relations

A copy of this letter must be transmitted to the federal granting agency with your application.

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608 263 4435

Department of Administration DOA-7020(R12/92)

Federal-State Relations Office 101 E. Wilson Street, 6th Floor P.O. Box 7868 Medison, WI 53707-7868 Telephone 608/267-2125

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ICATION NOTICE FORM Discretion arederal-state Relations Office Department of Administration 101 S. Webster St., 6th Floor Form DOA-7020 (R 5-88) P.O. Box 7868 Formerly FDA 50) Madison, WI 53707-7868 Telephone 608/267-2125 Agency I.D. (Optional) Applicant Agency CFDA # 9 3 • 5 Department of Health & Social Services Federal Agency to Receive Request 4 Address (Street/City/State/Zip) Department of Health & Human Services 1 West Wilson Street, P.O. Box 7935 6 Period of Funding Mo/Day/Year 7 Application Due Date Madison WI 53707-7935 Mo/Day/Year 09/30/95 Contact Person 06/16/95 09/29/96 Phone 266-0578 Susan G. Levy Executive Order 12372 Review Required 10 Area of Impact 8 Agency Project Title Counties/States Refugee Family Violence Prevention, Yes Education, and Intervention Statewide 12 Type of Assistance Clearinghouses: Notified Dates 11 Type of Application New Grant Formula Amendment to Current Grant X Discretionary X Continuation-Unchanged ____Continuation-Modified Other. All 13 Number of Years Previously Funded 14 Funding, Allotment and Position Data (including Federal indirect costs) \$180,000.00 Total Federal Funds Applied For _ **Existing Positions** New Positions Numeric Amount No. (FTE) Type No. (FTE) Revenue Type Appropriation Source 0 \$180,000 0 PR-F 446 Federal Cash/in-kinds 20,000 Local \$ \$ \$ 15 Indirect Cost Reimbursement X No Amount .. Yes Rate Title if other than Agency Secretary Authorized Agency Representative (Type or Print) 16 Authorizations Deputy Secretary Richard W. Lorang Date Delegated Review 8-17-25

FOR DEPARTMENT OF ADMINISTRATION USE ONLY

Approve With Conditions

Date

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Reviewing Analyst Jenniter

Recommendation: Approve

Signature ____
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WISCONSIN FEDERAL GRANT APPLICATION NOTICE-FORM Federal State Relations Office Department of Administration 101 S. Webster St., 6th Floor En Food Stamp P.O. Box 7868 Form DOA-7020 (R 5-88) Madison, WI 53707-7868 (Formerly FDA 50) Telephone 608/267-2125 3 Agency I.D. (Optional) Applicant Agency Dept. of Health & Social Services CFDA# Federal Agency to Receive Request 4 Address (Street/City/State/Zip) USDA - Food & Nutrition Service 1 West Wilson St., P.O. 7850 **Application Due Date** Period of Funding Mo/Day/Year 7 Madison, WI 53707-7850 Mo/Day/Year 10-1-95 Contact Person 8-15-95 9-30-96 Phone 9 Executive Order 12372 Review Required 10 Area of Impact 8 Agency Project Title Counties/States Family Nutrition Education Project Yes Statewide Clearinghouses: Notified Dates 12 Type of Assistance 11 Type of Application Grant **New Grant** XX Formula Amendment to Current Grant __ Discretionary Continuation-Unchanged Other. Continuation-Modified seven 13 Number of Years Previously Funded 14 Funding, Allotment and Position Data (including Federal indirect costs) 2,695,016 Existing Positions No. (FTE) Type Total Federal Funds Applied For _ **New Positions** No. (FTE) Type Numeric Revenue Type **Amount** Appropriation Source -0--0-\$ 2,695,016 PR-F Federal 440 \$ \$ 15 Indirect Cost Reimbursement XX No Amount . ___ Yes Rate. Title if other than Agency Secretary Authorized Agency Representative (Type or Print) 16 Authorizations Deputy Secretary Richard W. Lorang S(gnatur) XX Delegated Review FOR DEPARTMENT OF ADMINISTRATION USE ONLY SAI Number 122 **Reviewing Analyst Date Received** ___ Deny Approve With Conditions Approve Recommendation: **Date Due** Date ___ Signature . COMMENTS:

10 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

August 30, 1995

The Honorable James Doyle Attorney General Wisconsin Department of Justice 123 West Washington Avenue Madison, WI 53703

> Drug Control and System Improvement Discretionary Grant (Health Care Fraud Investigation and Prosecution Project), State Application Identifier Number WI950804-228-N16580XX

Dear Attorney General Doyle:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

This letter constitutes compliance with the requirements for State Clearinghouse review under Presidential Executive Order 12372. Regional Clearinghouses which have comments will send review letters directly to you.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely

James R. Klauser

Secretary

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

WISCONSIN FEDERAL GRANT APPLICATION NOTICE ment of Administration Federal-State Relations Office 101 E. Wilson Street, 6th Floor رير، د12/92) P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/257-2125 1 Applicant Agency. CFDA# 1 Department of Justice 4 Address (Street/City/State/Zip) Federal Agency to Receive Request Bureau of Justice Assistance 114 East-State Capitol Period of Funding Mo/Day/Year 7 Application Due Date Madison, WI 53702 (608) Mo/Day/Year 10/01/95 Matthew Frank Phone 266-0929 09/30/96 8 Agency Project Title Executive Order 12372 Review Required Area of Impact Counties/States Health Care Fraud Investigation and No. Prosecution Project State of 12 Type of Assistance 11 Type of Application Clearinghouses: Notified Dates Wisconsin X New Grant Grant **Amendment to Current Grant** Continuation-Unchanged □ Discretionary Continuation-Modified ΑII Number of Years Previously Funded, 14 Funding, Allotment and Position Data (including Federal indirect costs) Total Federal Funds Applied For_ Numeric New Positions No. (FTE) Typ **Existing Positions** Appropriation Source Revenue Type Amount 141 PR-F Federal \$.188,470 2.5 Project 348 Indi Federal 11.530 15 Indirect Cost Reimbursement 10.0% \$115,300 Rate 16 Authorizations Authorized Agency Representative (Type or Print) Title if other than Agency Secretary James E. Dovle Attorney General Delegated Review Reviewing AnalystV Approve, Recommendation:, Approve With Conditions Date Received

Date

101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

August 30, 1995

Alan Tracy, Secretary
Department of Agriculture, Trade &
Consumer Protection
2811 Agriculture Drive
PO Box 8911
Madison, WI 53708-8911

FY95 Consolidated Pesticide Cooperative Agreement (Amendment to WI940819-254-N66700XX), State Application Identifier Number WI950724-223-N66700XX

Dear Secretary Tracy:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

This letter constitutes compliance with the requirements for State Clearinghouse review under Presidential Executive Order 12372. Regional clearinghouses which have comments will send review letters directly to you.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

A copy of this letter must be transmitted to the federal granting agency with your application.

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